

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: _____ 2 Serial/Patent # **10/525764**

3 Please refund the following fee(s):

4 PAPER
NUMBER

5 DATE
FILED

6 AMOUNT

Filing

\$

Amendment

\$

Extension of Time

\$

Notice of Appeal/Appeal

\$

Petition

\$

Issue

\$

Cert of Correction/Terminal Disc.

\$

Maintenance

\$

Assignment

\$

Other

\$

7 TOTAL AMOUNT
OF REFUND

\$30023536

8 TO BE REFUNDED BY: \$500.00

10 REASON:

VISA....: XXXXXXXX XXXXXXXX

Treasury Check
VISA....: XXXXXXXX XXXXXXXX

Overpayment

Credit Deposit A/C #:

Duplicate Payment

9

No Fee Due (Explanation):

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME:

TITLE:

SIGNATURE: 04 FC:1615

PHONE:

OFFICE:

THIS SPACE RESERVED FOR FINANCE USE ONLY:

APPROVED:

DATE:

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: